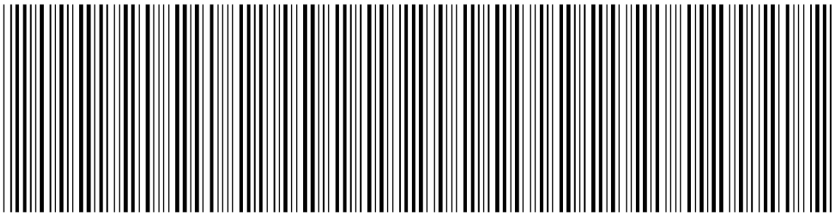


# **EXHIBIT 4**

**NYC DEPARTMENT OF FINANCE  
OFFICE OF THE CITY REGISTER**

This page is part of the instrument. The City Register will rely on the information provided by you on this page for purposes of indexing this instrument. The information on this page will control for indexing purposes in the event of any conflict with the rest of the document.



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**RECORDING AND ENDORSEMENT COVER PAGE**

**PAGE 1 OF 2**

**Document ID: 2015050100478001**

Document Date: 05-01-2015

Preparation Date: 05-01-2015

Document Type: UCC3 TERMINATION

COOPERATIVE

Document Page Count: 1

**PRESENTER:**

EBONY SIMS  
780 KANSAS LANE  
MONROE, LA 71203  
318-432-6430  
EBONY.SIMS@CHASE.COM

**RETURN TO:**

EBONY SIMS  
780 KANSAS LANE  
MONROE, LA 71203  
318-432-6430  
EBONY.SIMS@CHASE.COM

**PROPERTY DATA**

| Borough  | Block | Lot  | Unit           | Address             |
|--|-------|------|----------------|---------------------|
| MANHATTAN  | 1381  | 1104 | Entire Lot 10W | 45 EAST 66TH STREET |
| <b>Property Type:</b> SINGLE RESIDENTIAL COOP UNIT |       |      |                |                     |

**CROSS REFERENCE DATA**

CRFN: 2003000266724

**PARTIES**

**DEBTOR:**

RUDOLPH W. GIULIANI  
45 EAST 66TH STREET, APT. 10W  
NEW YORK, NY 10021

**SECURED PARTY:**

JPMORGAN CHASE BANK  
20 SOUTH CLINTON AVENUE  
ROCHESTER, NY 14604

**FEES AND TAXES**

**Mortgage :**

|                          |           |             |
|--------------------------|-----------|-------------|
| Mortgage Amount:         | \$        | 0.00        |
| Taxable Mortgage Amount: | \$        | 0.00        |
| Exemption:               |           |             |
| TAXES: County (Basic):   | \$        | 0.00        |
| City (Additional):       | \$        | 0.00        |
| Spec (Additional):       | \$        | 0.00        |
| TASF:                    | \$        | 0.00        |
| MTA:                     | \$        | 0.00        |
| NYCTA:                   | \$        | 0.00        |
| Additional MRT:          | \$        | 0.00        |
| <b>TOTAL:</b>            | <b>\$</b> | <b>0.00</b> |
| Recording Fee:           | \$        | 40.00       |
| Affidavit Fee:           | \$        | 0.00        |

**Filing Fee:**

|                                 |    |      |
|---------------------------------|----|------|
|                                 | \$ | 0.00 |
| NYC Real Property Transfer Tax: | \$ | 0.00 |
| NYS Real Estate Transfer Tax:   | \$ | 0.00 |

**RECORDED OR FILED IN THE OFFICE  
OF THE CITY REGISTER OF THE**

**CITY OF NEW YORK**

Recorded/Filed 05-06-2015 12:51

City Register File No.(CRFN):

**2015000152229**



*Annette McMill*

**City Register Official Signature**

# UCC FINANCING STATEMENT AMENDMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

|  |  |
|--|--|
| A. NAME & PHONE OF CONTACT AT FILER [optional] |  |
| B. SEND ACKNOWLEDGMENT TO: (Name and Address)  |  |

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

|  |  |   |  |
|--|--|---|--|
| 1 a. INITIAL FINANCING STATEMENT FILE#<br>2003000266724 7/29/03 BLOCK:1381 LOT:1104 UNIT:10W   |  | 1b. This FINANCING STATEMENT AMENDMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS.<br><input checked="" type="checkbox"/> |  |
| 2. <input checked="" type="checkbox"/> TERMINATION: Effectiveness of the Financing Statement identified above is terminated with respect to security interest(s) of the Secured Party authorizing this Termination Statement.  |  |   |  |
| 3. <input type="checkbox"/> CONTINUATION: Effectiveness of the Financing Statement identified above with respect to security interest(s) of the Secured Party authorizing this Continuation Statement is continued for the additional period provided by applicable law.   |  |   |  |
| 4. <input type="checkbox"/> ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7b and address of assignee in item 7c, and also give name of assignor in item 9.   |  |   |  |
| 5. AMENDMENT (PARTY INFORMATION): This Amendment affects <input type="checkbox"/> Debtor or <input type="checkbox"/> Secured Party of record. Check only <u>one</u> of these two boxes.<br>Also check <u>one</u> of the following three boxes <u>and</u> provide appropriate information in items 6 and/or 7.<br><input type="checkbox"/> CHANGE name and/or address Please refer to the detailed instructions in regards to changing the name/address of a Party. <input type="checkbox"/> DELETE name Give record name to be deleted in item 6a or 6b. <input type="checkbox"/> ADD name: Complete item 7a or 7b, and also item also complete items 7e-7g if |  |   |  |
| 6. CURRENT RECORD INFORMATION  |  |   |  |
| 6a. ORGANIZATION'S NAME  |  |   |  |
| OR   | 6b. INDIVIDUAL'S LAST NAME<br>GIULIANI | FIRST NAME<br>RUDOLPH   | MIDDLE NAME<br>W<br>SUFFIX   |
| 7. CHANGED (NEW) OR ADDED INFORMATION  |  |   |  |
| 7a. ORGANIZATION'S NAME  |  |   |  |
| OR   | 7b. INDIVIDUAL'S LAST NAME             | FIRST NAME  | MIDDLE NAME<br>SUFFIX  |
| 7c. MAILING ADDRESS  |  | CITY  | STATE<br>POSTAL CODE<br>COUNTRY  |
| 7d. SEE INSTRUCTIONS   | ADD'L INFO RE ORGANIZATION DEBTOR      | 7e. TYPE OF ORGANIZATION  | 7f. JURISDICTION OF ORGANIZATION<br>7g. ORGANIZATIONAL ID #, if any<br><input type="checkbox"/> NONE |
| 8. AMENDMENT (COLLATERAL CHANGE): check only <u>one</u> box.<br>Describe collateral <input type="checkbox"/> deleted or <input type="checkbox"/> added, or give entire <input type="checkbox"/> restated collateral description, or describe collateral <input type="checkbox"/> assigned.   |  |   |  |

9. NAME OF SECURED PARTY OF RECORD AUTHORIZING THIS AMENDMENT (name of assignor, if this is an Assignment). If this is an Amendment authorized by a Debtor which adds collateral or adds the authorizing Debtor, or if this is a Termination authorized by a Debtor, check here ☐ and enter name of DEBTOR authorizing this Amendment

|  |                            |            |                       |
|--|----------------------------|------------|-----------------------|
| 9a. ORGANIZATION'S NAME<br>JPMORGAN CHASE BANK |                            |            |                       |
| OR   | 9b. INDIVIDUAL'S LAST NAME | FIRST NAME | MIDDLE NAME<br>SUFFIX |

10. OPTIONAL FILER REFERENCE DATA  
Loan Number: 1197026081

FILING OFFICE COPY - UCC FINANCING STATEMENT AMENDMENT (FORM UCC3) (REV. 05/22/02)